POSITION	INITIALS	ID MO.	DATE	
FEE DETERMINATION			05/16/0	
O.I.P.E. CLASSIFIER	1Pm	32	15/25	
FORMALITY REVIEW	do	720	17/-02	
RESPONSE FORMALITY REVIEW	- 100	100	PT UXE	

## INDEX OF CLAIMS

Rejected	N Non-electer
= Allowed	IInterference
<ul> <li>(Through numeral) Canceled</li> </ul>	A Appeal
÷ Restricted	O Objected

Claim	Date	Claim	Date	Claim	Date
Pinal Original Original		- B			
E E		Final		Final Original	
		i ō		Final	
M		51		101	
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23	<del>                                     </del>	73		123	
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If more than 150 claims or 10 actions staple additional sheet here

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